

MARK P. MILLER 98
DANNA MILLER
10116 S WASATCH BLVD. PH. 801-947-0639
SANDY, UT 84092

97-225/1243
051433258

DATE Sept 8, 2005

PAY TO
THE ORDER OF

D. O. G. M. \$ 440.00
Four hundred forty dollars and no/100 DOLLARS

Security Features
Included.
Details on Back.

FAR WEST BANK

North Provo Office
2191 North Canyon Road
Provo, Utah 84604

MEMO

[Signature]

RECEIVED

SEP 12 2005

DIV OF OIL GAS & MINING

Attn:

Paul Baker

Here is are money
for the fine. It
took longer to pay,
because we were

broke - SORRY
RECEIVED

SEP 12 2005 Mark Miller

DIV. OF OIL, GAS & MINING 706 6231

050015

Vicki



State of Utah

Department of Natural Resources

MICHAEL R. STYLER
Executive Director

Division of Oil, Gas & Mining

JOHN R. BAZA
Division Director

JON M. HUNTSMAN, JR.
Governor

GARY R. HERBERT
Lieutenant Governor

August 31, 2005

CERTIFIED RETURN RECEIPT
7002 0510 0003 8603 3257

Mr. Mark Miller
Expectations
11949 Hidden Canyon Lane
Sandy, Utah 84092-7198

Subject: Final Assessment, Expectations Unpermitted Site, Cessation Order MC-2005-03-03-01, S/035/024, Salt Lake County, Utah

Dear Mr. Miller:

On April 20, 2005, the Division sent you the proposed reassessment, via Certified Mail, associated with the above-mentioned Cessation Order. Under rules R647-7-106 & R646-7-107 you are allowed 30 days from the receipt of the proposed assessment to request a conference or hearing to review the fact of the violation or assessment. Our records indicate that you received the reassessment on April 21, 2005.

If you wanted to appeal the fact of the Cessation Order or request a review of the proposed penalty assessment, that conference or hearing should have been requested on or before May 23, 2005. No request has been made; therefore, under R647-7-108 the opportunity to appeal is past and the proposed assessment is now considered final.

The penalty in the amount of \$440 is now due and payable. Please remit payment to the Division, mail c/o Vickie Southwick. Failure to provide the required payment within 30 days may result in civil action in the appropriate district court.

Thank you for resolving this situation. Please call me at (801) 538-5325 if you have any questions.

Sincerely,

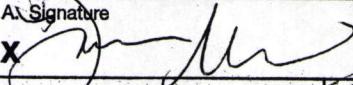
Daron R. Haddock
Assessment Officer

DRH:jb

Enclosure: Worksheet

cc: Vicki Bailey, DOGM
Vickie Southwick, DOGM

O:\M035-SaltLake\S0350024-Expectations\non-compliance\FinalAssessmentCO.doc

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>MARK MILLER EXPECTATIONS 11949 HIDDEN CYN LN SANDY UT 84092-7198</p>		<p>B. Received by (Printed Name) Danna Miller</p> <p>C. Date of Delivery SEP 20 2005 USPS</p>	
<p>2. Article Number (Transfer from service label)</p> <p>JB DOGM S/035/024 8/31/05</p>		<p>D. Is delivery address different from item 1? If YES, enter delivery address below:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt</p>	

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
<p>JB DOGM S/035/024 8/31/05</p>	
<p>Postage \$</p> <p>Certified Fee</p> <p>Return Receipt Fee (Endorsement Required)</p> <p>Restricted Delivery Fee (Endorsement Required)</p> <p>Total Postage & Fees \$</p>	<p>Final Assessment MC-2005-03-03-01</p> <p>Postmark Here</p>
<p>Sent To MARK MILLER - EXPECTATIONS Street, Apt. No., or PO Box No. 11949 HIDDEN CANYON LN City, State, ZIP+4 SANDY UT 84092-7198</p>	
<p>PS Form 3800, January 2001 See Reverse for Instructions</p>	

050016